

Application Data Sheet

Application Information

Application number:: 10/576,506
Filing Date:: April 18, 2006
Application Type:: Non-Provisional
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: GLYCOPEGYLATED FACTOR IX
Attorney Docket Number:: ~~40853-5144-US1~~ 101961-5144-US1
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 27
Small Entity?:: Yes No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Shawn
Middle Name::
Family Name:: DeFrees
Name Suffix::
City of Residence:: North Wales
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 126 Filly Drive
City of Mailing Address:: North Wales
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19454

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: J.
Family Name:: Bayer
Name Suffix::
City of Residence:: San Diego
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 6105 Dirac Street
City of Mailing Address:: San Diego
State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 92122

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Caryn
Middle Name::
Family Name:: Bowe
Name Suffix:: L.
City of Residence:: Doylestown
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: ~~276 Cherry Lane~~ 310 Maple Avenue
City of Mailing Address:: Doylestown
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 18901

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Krishnasamy
Middle Name::
Family Name:: Panneerselvam
Name Suffix::
City of Residence:: Poway
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 14917 Morningside Dr.
City of Mailing Address:: Poway
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 92064

Correspondence Information

Correspondence Customer Number:: 043850

Representative Information

Representative Customer Number:: 043850

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Phase of	PCT/US2004/41070	12/03/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/527,089	12/03/03
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/539,387	01/26/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/592,744	07/29/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/614,518	09/29/04
PCT/US2004/41070	<i>An application claiming the benefit under 35 USC 119(e)</i>	60/623,387	10/29/04

Foreign Priority Information

Country::	Application number::	Filing Date::
WO	PCT/US2004/41070	December 3, 2004

Assignee Information

Assignee Name:: Novo Nordisk A/S
Street of mailing address:: Novo Allé
City of mailing address:: Bagsvaerd
State or Province of mailing address::
Country of mailing address:: Denmark
Postal or Zip Code of mailing address:: 2880